



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Chitoshi ITO et al.

Group Art Unit: 2626

Application No.: 09/672,033

Examiner: M. Wallerson

Filed: September 29, 2000

Docket No.: 107497

For: DATA PROCESSING FOR ARRANGING TEXT AND IMAGE DATA ON A
SUBSTRATE

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AMENDMENT

Technology Center 2600

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the August 31, 2004 Office Action and the November 22, 2004 personal
interview, please consider the following:

Amendments to the Specification;

Amendments to the Claims as reflected in the listing of claims; and

Remarks.

11/30/2004 FHETEKI1 00000038 09672033

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108.00 OP

OLIFF & BERRIDGE, PLC
Telephone: (703) 836-6400
Facsimile: (703) 836-2787



PATENT APPLICATION

Attorney Docket No.: 107497

CUSTOMER NUMBER 25944

AMENDMENT TRANSMITTAL

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For: DATA PROCESSING FOR ARRANGING TEXT AND IMAGE DATA ON A SUBSTRATE

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Technology Center 2600

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.
☐ Small entity status of this application has been established.

The filing fee has been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE	OR	RATE	ADD'L FEE
TOTAL CLAIMS	*46 MINUS	**40	=6	x 9	\$		x 18	\$ 108
INDEP CLAIMS	*4 MINUS	***4	=0	x 44	\$		x 88	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 150	\$	OR	+300	\$
					\$			\$ 108

- * If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 161043 in the amount of \$108.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Maryam M. Ipakchi
Registration No. 51,835

JAO:MMI/ccs

Date: November 29, 2004